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Signature

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05/21/99

Date

UTILITY PATENT APPLICATION

Attorney Docket No. 003543.P002 First Inventor or Application Identifier | Hai Bui

U.S		RANSMITTAL	Title CONSTANT OCULAR PRESSURE ACTIVE INFUSION SYSTEM								
ت		ovisional applications under 37 CFR 1.53(b))	Express Mail	ail Label No. EL236786540US							
PTO	AF See MPEP chapter	PPLICATION ELEMENTS r 600 concerning utility patent application contents		ΑĽ	oner for Patents on 231						
1.	Z-3	smittal Form	. · · · · <u>-</u>	5. Microfiche Computer Program (Appendix)							
	Specificat (preferred as - Descripti - Cross Re - Statemer - Reference - Backgrou - Brief Sur - Brief Des - Detailed - Claim(s) - Abstract	wangement set forth below) ive title of the Invention eferences to Related Applications nt Regarding Fed sponsored R & D ce to Microfiche Appendix und of the Invention mmary of the Invention scription of the Drawings (if filed) Description	23)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. □ Computer Readable Copy b. □ Paper Copy (identical to computer copy) c. □ Statement verifying identity of above copies **ACCOMPANYING APPLICATION PARTS** 7. ★ Assignment Papers (cover sheet & document(s)) 8. □ 37 C.F.R. § 3.73(b) Statement □ Power of Attorney (when there is an assignee) 9. □ English Translation Document (itapplicable)							
4.	b.	wly executed (original copy) py from a prior application (37 C.F.R. continuation/divisional with Box 16 completed)	ng blication, 33(b).	10. \texts 11. \begin{align*} 12. \begin{align*} 13. \begin{align*} 14. \begin{align*} \end{align*}	Statement (IDS)/PTO - 1449 Citations Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized) *Small Entity Statement filed in prior application, Statement(s) Status still proper and desired						
Ş	NTTY FEES, A SW	<u>1 & 13</u> : INORDER TO BE ENTITLED TO PA MALL ENTITY STATEMENT IS REQUIRED (ONE FILED IN A PRIOR APPLICATION IS R I 28).	(37 C.F.R.	15. 📋	Other:						
Fo	If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a prefiningly amendment. Continuation Divisional Continuation-in-part (CIP) of prior application No: Prior application Information: Examiner Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
	17. CORRESPONDENCE ADDRESS										
ا	Customer Number of Bar Code Label (Insert Customer No. or Atland bar code label here) or Correspondence address below										
Name BLAKELY, SOKOLOFF, TA				OR & ZA	FMAN LLP						
/	Address	12400 Wilshire Bouleva	ard, Seventh	Floor							
-	City	Los Angeles	St	ate	California	Zip Code	90025				
_	Country	U.S.A.	Telephon	ne (714) 557-3800 Fax (714) 557-3347							
	Name (Print/1	Ben J. Yorks, Reg.	No. 33,609								

Burden Hour Statement: This form is estimated to take 0/2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (2/98)

Approved for use through 09/30/2000. OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.
These are the fees effective Octover 1, 1997.
Small Entity payments <u>must</u> be supported by a small entity
statement, otherwise large entity fees must be paid. See
Forms PTO/SB/09-12.
See 37 C.F.R §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$) 606.00

Complete If Known						
Application Number						
Filing Date	May 21, 1999					
First Named Inventor	Hai Bui					
Examiner Name						
Group/Art Unit						
Attorney Docket Number	003543 P002					

METHOD OF PAYMENT (check one)						FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge						3. ADDITIONAL FEE							
Deposit	indicated fees and credit any over payments to:					Large	Large Entity Small Entity						
Account Number	02-2666				Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee	Description	Fee	e Paid	
Deposit Account Name	Account Blakely Sokoloff Taylor & Zafman LLP					105 127	130 50	205 227			e filing fee or oath e provisionai fiiing fee	or	
Charge Any Additional Fee Required Under 37 CFR §\$ 1.16,1.17, 1.18 and 1.20. Charge the Issue Fee Set in 37 CFR § 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)							130 2,520		2,520	Non-English spe For filing a requ	est for reexamination		
							920*	112	920	Examiner action	dication of SIR prior to	'	
2. A Payment Enclosed: Money Deflor Order Other						113	1,840*	113	1,840	*Requesting publication of SIR after Examiner action			
Order Guier						115	110	215	55	Extension for re	sponse within first mo	onth	
FEE CALCULATION							380	216	190	Extension for re	sponse within second	d month	
	1. BASIC FILING FEE						870	217	435	Extension for re	sponse within third m	onth	
	Large Entity Small Entity						1,210	218			sponse within fourth i	L	
Fee Fee Code (\$)		Fee	Fee Descri	ption	Fee Paid	ee Paid 128 1,850 228 925 Extension for response within fifth month				onth			
Code (\$) 101 760		(\$) 380	Utility filing	n foo	\$380.00	119	300	219	150	Notice of Appea	ai		
106 310		155	Design fili	•	1000.00	120	300	220	150	Filing a brief in	support of an appeal		
107 480		240	Plant filing			121	260	221	130	Request for ora	i hearing		
108 760		-				138	1,510	138	1510	Petition to instit	ute a public use proce	eding	
114 150		75		-		140	110	240	55	Petition to reviv	e - unavoidable		
·		CUDS	-OTAL /4\	(6)	200.00	141	1,210	241	605	Petition to reviv	e - unintentional		
SUBTOTAL (1) (\$) 380.00						142	1,210	242	605	Utility issue fee	(or reissue)		
2. EXTRA CLAIM FEES Extra Feetrom					143	430	243	215	Design issue fe	е			
Claims below Fee Paid				144	580	244	290	Plant issue fee					
Totai Claims 32 - 20 = 12 X 9.00 = \$108.00				122	130	122	130	Petitions to the Commissioner					
Ciaims 5 - 3 = 2 X 39.00 = \$156.00			123	50	123	50	Petitions related	lated to provisional applications					
Multiple Dep	Multiple Dependent			126	240	126	240	Submission of I	nformation Disclosure	Stmt			
Large Entity Small Entity				581	40	581	40	Recording each patent assignment per property (times number of properties)			40.00		
Fee Fee	Fee	Fee	Fee Description	on		146	790	246	395		sion after final rejectio	on	
Code (\$)	Code	***				140	700	040	205	(37 CFR 1.129)			
103 18		9				149	790	249	აყე	examined (37 C	onal invention to be CFR 1.129(b))		
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104 130 109 78		130 39	**Reissue i	ndependent c			fee (sp		_				
110 18	210	9		u patent :laims in exce iginal patent	ss of 20								
		SUBT	COTAL (2)	(\$)	186.00	*Reduc	ed by Bas	sic Filling	Fee Pai	id su	JBTOTAL (3)	3)	40.00
SUBMITTED BY											Complete (if	applicable)	-
Typed or Printed Name Ben J. Yorks, Reg. No. 33,60				 09					Reg. Number				
Signature Roy Varia						Date		05/21/99	Deposit Account User ID	02-26	666		

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PTG/58/10 (1-93)
Abproved for use through 09/30/2002. Old8 0451-0/031
Patent and Thesematicollege: U.S. DEPARTMENT OF COMMERCE
Under the Repervoir Ruduction Act of 1995, no persons are required to receive to a collection of information unitsus it displays a valid CMB control number. STATEMENT CLAIMING SMALL ENTITY STATUS Docket Number (Optional)

(37 CFR 1.9(1) & 1.27(c)) - SMALL BUSINESS CONCERN 003543.P002
Applicant, Patentee, or Identifier: Hai Bui
Application or Patent No.:
Filed or issued: May 21, 1999 Title: CONSTANT OCULAR PRESSURB ACTIVE INFUSION SYSTEM
I hereby state that I am
☑ the owner of the small business concern identified below: ☑ an official of the small business concern empowered to act on behalf of the concern identified below:
NAME OF SMALL BUSINESS CONCERN Bubilion
ADDRESS OF SMALL BUSINESS CONCERN 9436 Kiwl Circle
Fountain Valley, California 92708
I hereby stated that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121 for purposes of paying reduced fees to the United States Patent and Trademark Office. Questions related to size standards for a small business concern may be directed to: Small Business Administration, Size Standards Staff, 409 Third Street, SW, Washington, DC 20418.
I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:
 Ithe specification filed herewith, with title as listed above. □ the application identified above. □ the patent identified above.
If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights to the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who could not qualify as a an independent inventor under 37 CFR 1.8(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.8(d), or a non-profit organization under 37 CFR 1.9(e).
Each such person, concern or organization having any rights in the invention is listed below:
☑ No such person, concern, or organization exists. ☐ Each such person, concern or organization is listed below.*
Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities (37 CFR 1.9(e).
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitiement to small entity status prior to paying, or at the time of paying, the earliest of the issue tee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))
NAME OF PERSON SIGNING: Hat But
TITLE OF PERSON OTHER THAN OWNER: President
ADDRESS OF PERSON SIGNING: 9436 KIWI CIR. FOUNTAIN VALLEY OF 92708
81GNATURE: 30 aufru DATE: 5/21/99

Burden Hour Streement: This form is settinated to take 0.2 hours to complete. Time will very depending upon the meads of the Individual case. Any comments on the amount of time you are required to complete the torm should be cent to the Other Information Officer, Potent and Tradement Office, Weshington, OC 20231. DO NOT SEND FEEL OR COMPLETED FORMS TO THIS ADDRESS. SENG TO: Assistant Commissioner for Palents, Washington, DC 20231.

NO. 5443 P. 2

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